

DECLARATION AND POWER OF ATTORNEY FOR UNITED STATES PATENT APPLICATION

X 0	riginal		Supplemental		Substitute		
As a be	elow named inventor, I herel	by dec	clare that:				
My res	idence, post office address a	and ci	tizenship are as stated below next to	my r	ame, and		
and joi	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if more than one name is listed below) of the subject matter which is claimed and for which a United States patent is sought on the invention entitled:						
Metho	Methods of obtaining isoform specific expression in mammalian cells						
the spe	ecification of which:						
	is attached hereto.						
	was filed on (day	//montl	as Application No				
	and, if this box (□) contain	s an 🕽	c				
	□ was amended on	(day	/month/year)				
×	was filed as Patent Cooper	ration	Treaty international Application No.				
•	PCT/EP 03/00611		on <u>22/01/2003</u> (day/month/year)				
	and, if this box (□) contain	s an 3	ĸ				
	entered the national	al stag	e in the United States and was accor	ded	Application No.		
	and, if this box (□) contain	s an ¹	×				
	□ was amended, sub-	seque	ent to entry into the national stage, on	· -	(day/month/year)		

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) specifically referred to above and, if this application was filed as a Patent Cooperation Treaty international application, by any amendments made during the international stage (including any made under Patent Cooperation Treaty Rule 91, Article 19 and Article 34).

I acknowledge my duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56, including, for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or Patent Cooperation Treaty international filing date of the continuation-in-part application.

I hereby claim the benefit under 35 U.S.C. 119(a)-(d) or (f) or 365(b) of any foreign application(s) for patent, inventor's certificate or plant breeder's right certificate listed below and under 35 U.S.C. 365(a) of any Patent Cooperation Treaty international application(s) designating at least one country other than the United States listed below and have also listed below any foreign application(s) for patent, inventor's certificate or plant breeder's right certificate and Patent Cooperation Treaty international application(s) designating at least one country other than the United States for the same subject matter and having a filing date before that of the application the priority of which is claimed for that subject matter:

COUNTRY/REGION (OR P.C.T.)	APPLICATION No.	FILING DATE (day/month/year)	Р	PRIORITY	CLA	IMED		
Great Britain	0201477.7	23/01/2002	×	Yes		No		
				Yes		No		
				Yes		No		
				Yes		No		
				Yes		No		
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:								
APPLICATION NO.		FILING DATE						

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s) listed below and under 35 U.S.C. 365(c) of any Patent Cooperation Treaty international application(s) designating the United States listed below:

United States	United States	Status (Pending,	International	
Application No.	Filing Date	Abandoned or U.S.	Application No.	and Filing Date
	(day/month/year)	Patent No.)		(dav/month/vear)

I hereby appoint the registered practitioners associated with Customer No. 001095, respectively and individually, as my attorneys and agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

If this box (contains an x), I hereby authorize the registered practitioners associated with Customer No. 001095 and any others acting on my behalf to take any action relating to this application based on communications from the Patent and Licensing Officer, Novartis Research Foundation, branch office Friedrich Miescher Institute for Biomedical Research, Basel, Switzerland or a successor thereto, without direct communication from me.

Please address all communications to the address associated with Customer No. 001095 which is currently Richard Gearhart, Novartis, Corporate Intellectual Property, One Health Plaza, Bldg. 430, East Hanover, NJ 07936-1080.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole or first joint inventor	Malgorzata Anna KISIELOW	00	
Inventor's signature	M. Kisielas	Date -	16 June 2004 (day/month/year)
Residence	6500 Bellinzona, Switzerland CHX		
Citizenship	citizen of Poland		
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Full name of second joint inventor, if any	Sandra KLEINER 2-00		
Inventor's signature	Somolia Reiner	Date	15 June 2004 (day/month/year)
Residence	07639 Weissenborn, Germany DEX		
Citizenship	citizen of Germany		
Post Office Address	Schöne Aussicht 4 07639 Weissenborn Germany		

IMPORTANT: Before this declaration is signed, the patent application (the specification, the claims and this declaration) must be read and understood by each person signing it, and no changes may be made in the application after this declaration has been signed.

Full name of third joint inventor, if any	Yoshikuni NAGAMINE	3.00		
Inventor's signature	Alley -		Date	(day/month/year)
Residence	4125 Riehen, Switzerland	CHX		
Citizenship	citizen of Japan			
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Full name of fourth joint inventor, if any				
Inventor's signature			Date	(day/month/year)
Residence				
Citizenship				
Post Office Address				
Full name of fifth joint inventor, if any				
Inventor's signature			Date -	(day/month/year)
Residence				
Citizenship				
Post Office Address				